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Role of Matra Basti in Management of Autism in Children-A Case Study

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Abstract:

Autism is a type of neurodevelopmental disorder. The prevalence of Autism Spectrum Disorder (ASD) in India is estimated to be around 1 in 68 children, according to a 2021 study published in the Indian Journal of Pediatrics. This translates to approximately 1.12 (0.74-1.68) per 100 children aged 2-9 years. Despite the high prevalence & associated impairment, Autism remains underdiagnosed and undertreated in many populations. Underlying etiology of autism spectrum disorder is still unknown. In Ayurveda, most psycho social abnormalities are included in the category of unmad. The present study describes the case of a child with Autism, who has been clinically diagnosed and treated with Ayurveda medications and Panchkarma procedure. There is significant improvement in relieving symptoms noted after giving Matra basti in present case.

Keywords: Autism, Unmad, Matra basti, Pinda sweda, etc.

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INTRODUCTION:

Any abnormal or impaired development that is developed before the age of 3 years identified by abnormally developed social skills, communication problems and a restricted behaviour is defined as an Autism. Autism can be correlated with Unmad in Ayurveda. A 3 years old female child with symptoms of Autism treated with Matra basti followed by oral shaman chikitsa, by following the treatment principals of Unmad. Significant Improvement noted within 2 months.

Review of Literature

Unmad lingam- Perverted intellect, psychic agitation, restless eyes, impatience, incoherent speech and vacant hridaya (mind)-these are the general symptoms of unmad.

Unmad Samprapti: By these causative factors the doshas get vitiated in the person having weak core, the mind-carrying channels they derange the mind of the person, proportion of sattva (guna) and affect hridaya, the seat of intellect (buddhi).

Role of shodhana in unmad – Shodhan chikitsa(evacuation) purifies heart,senses,head and bowel which leads mental peace,and improvement in smriti (memory) & sandhya(consciousness).

Material and Methods

Study Design: Single case observational study conducted at a Kaumarbhritya department in YMT ayurved college, Kharghar, Navi Mumbai.

Study Duration: 30 days procedure & oral medicines followed by next 30 days oral medications with every 7 days follow up.

Tools and Instruments: -DSM 5 Diagnostic Criteria

Parents/guardians willing to participate in treatment and follow-up and given written informed consent for the same.

Intervention Strategy:

Psychoeducation for parents.

Dietary modifications based on Ayurvedic guidelines

Herbal cognitive supplements with Balpanchkarma (under supervision)

Case History (Detailed)-

Name: ABC.,

Age:3 years

Gender: female,

Weight: 14 kgs

Chief Complaints:

- Poor response to social interaction & Poor eye contact, do not maintain eye contact with parents and sibling, and do not respond to their verbal calling.
- Speech delay (Speak only Monosyllables)
- Problem in paying attention.
- Staying in own self-absorbed world.
- Repetitive movements of upper limbs.
- Disturbed sleep, does not recognise places and people.
- gets engaged in watching cartoon over mobile but does not getting affected by

decrease and increasing sound, or zero noise around.

-always prefers to move around and climb up the furniture.

History of Present Illness:

Parents observed the symptoms through patients growing age, and worried about poor interaction, poor eye contact, speech delay and staying in self-absorbed world. Parents reported to Balrog OPD, YMT Ayurved college, Kharghar, and seeking for ayurvedic management.

Developmental History:

Social smile – 3 months. neck holding – 3½ months, sitting – 8 months, Walking without support – 14 months, Speech – monosyllabic speech-Delayed speech

Birth History:

- Near term (36 weeks)/LSCS /CIAB /AGA/FCH /2.75 Kgs
-LSCS in view of pre-LSCS & cord around neck.

Maternal History:

Patient is second child having 5 years old elder sister with normal development.
- G2P2L2: G1 – Female – LSCS – Normal child, G2 – Female – LSCS – Autistic child (Gestational Hypertension at time of 2nd Delivery)

Past Illness History: No any

Immunization: Under EPI till age.

Family History:

Father: Engineer; no history of impulsivity during childhood.

Mother: Homemaker; no psychiatric history.

Sibling: 5-year-old sister, developmentally normal.

Behavioral Observations: During consultation, the child left the seat multiple times, was constantly playing, staying in self-absorbed world, do not responding to verbal calling, do not maintain eye contact with strangers and parents, staying in contact with parents but do not responding to their verbal calling and reacting less to painful stimuli. Speaks only Monosyllables. Get involved in watching cartoon video on mobile but have a same attention and remain unaffected by decreasing volume to zero initially throughout the procedure she doesn't recognizing place or people involved in ongoing therapy (doctors, therapist, OPD, panchkarma rooms).

On examination:

Cry: less than usual, Present medication-No any

Anthropometry –

Height: 114cm, Weight: 14kg, MAC: 14cm, MTC: 25cm, HC: 51cm

Intervention:

Child is treated with daily snehan, swedan, alternate day matra basti for 1 month, along with oral shaman medicines. assesment done before and after treatment.

Sarvanga Snehan	Vacha-Jyotishmati Tail	Daily for 15 days	Full body oleation
Pind Sweda	Churna: Dwitiya Bala-Ativisha-Yapan Basti Churna Contents: Bala, Ativisha, Rasna, Aragwadh, Madanphal, Bilva, Guduchi, Punarnava, Erand, Ashwagandha, Sahachar, Palash, Devdar, Dashmool, Kulith, Mulak, Shatpushpa, Kushtha, Pippali, Vacha, Priyangu, Kutaj, Rasanjan, Hapusha	Daily for 15 days	Swedana therapy
Matra Basti	Kalyanak Ghrut	20 ml, alternate days for 1 month	Per rectal administration

Shamana Aushadhi (Oral Medications)

Medicine	Dosage	Timing	Duration
Kalyanak Leh	1 tsp	1 – 0 – 1	1 month
Saraswat Ghrut	1 tsp	At bedtime (HS)	1 month
Brahmi Ghrut	1 tsp	Morning	1 month

Child Assessment Report according to -DSM -V CRITERIA FOR AUTISM

Name of Patient: _____

Age/Sex: _____ 3 years /female _____

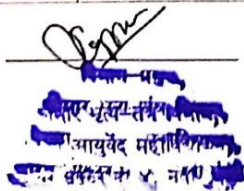
Weight: _____ 14.2 kgs _____

Criteria	Score 1	Score 2	Score 3	Score 4	Before Treatment	After Treatment
I. Social Relationship	No evidence of problems or difficulty in relation to people.	Slight abnormalities; child avoids eye contact.	Moderately abnormal; continuous effort needed to get attention.	Severely abnormal; unaware or uninterested in adult activity.	3	2
II. Impairment in Communication	Verbal communication appropriate for age.	Mild abnormality; retarded speech.	Moderate; absent or mixed abnormal/meaningful speech.	Severe; no meaningful speech, may make noises or shout like animal.	4	3
III. Attachment to Non-living Objects	Normal interest in toys/objects.	Mild interest.	Moderate focus on insignificant objects.	Severe inappropriate attachment to objects.	3	2
IV. Unstable and Indecisive Mind	Age-appropriate visual response.	Mildly abnormal; interested in mirrors or space staring.	Moderately abnormal; avoids eye contact.	Severely abnormal; constant avoidance, fluttering mind.	3	2
V. Fear and Lack of Courage	Normal fear/nervousness for age.	Mild; occasional abnormal fear/nervousness.	Moderate abnormal fear/nervousness.	Severe abnormal fear/nervousness.	2	1

Total Scoring & Interpretation

Total Score Range	Rating	Before	After
5	Child within normal limits		
6 - 10	Mild abnormalities		10
11 - 15	Moderately abnormal	15	
16 - 20	Severe abnormalities		

Doctors Signature: _____



DISCUSSION:

As per Unmad samprapti, by causative factors the doshas get vitiated in person having alp satv(weak core) and affects hriday which is base of buddhi, by getting accumulated in the mind-carrying channels (Manovah strotas) they derange the mind of the person (causing pramoh) (4). As mentioned by Acharya Charaka, Kalyanak ghrita indicated to use in unmad. chikitsa and chetas (mind) vikaras which indicates involvement of manovah strotas. Kalyanak ghrita also indicated to use in trutiyak and chaturthak jwar, both trutiyak and chaturthak jwar has involvement of mastishk (brain). Hence Kalyanak ghrit will be beneficial in improving functioning of mind and buddhi (intellect) by keeping manovah strotas refined. Shodhan chikitsa (evacuation)purifies heart, senses,head and bowel which leads mental peace,and improvement in snriti (memory) & sandnya(consciousness)

Basti a therapeutic intervention in Ayurveda, involves the administration of medicated oils or ghrita through the rectal route to controll imbalances in the body.Basti drugs first reach the Pakvashaya (Intestines) and then Grahani (stomach & duodenum), as pakvashay and grahani are sites for Purishadhara Kala (Layer holding excreta) and Pittadhara Kala (Layer holding bile) respectively,Therefore, Basti directly acts on both Purishadhara Kala and Pittadhara Kala. As mentioned by Commentator Dalhana, Purishadhara Kala and Asthidhara Kala (Layer holding bones) are same, and also Pittadhara Kala and Majjadhara Kala (Layer holding marrow) are

same.This indicates that Basti has a direct action on Asthi (Bones) and Majja (Marrow). Majja is present in both, bones and the Matulunga (Mastaka Majja). Vata Nadi (nerve channels) is also made of Majja. This indicates that Basti is useful in disorders of the central nervous system.

According to Acharya Charaka, Matra Basti can be given at all times without complications or restrictions, can be practiced at any time in children. It pacifies the Doshas and increases balance to mind & body. the dose of Matra Basti is equal to the dose of Hrasva Snehapana, which gets digested in six hours., minimal dosage of Sneha used in Matra Basti ensures minimal risk of complications while maximizing therapeutic benefits. Basti acts on the whole body, through the gut brain axis it acts on brain and helps reducing stress, anxiety and depression.Basti dravya may activates the Neuro humoral transmission by stimulating the Gut brain axis, regulating changes in behaviour and emotions. And also, Rajoguna is more predominant in Manasavikara. This guna usually controlled by Vata dosha,so when we control Vata dosh, Rajo guna stays in normal state Hence Basti has been planned.

Ghrita will have Omega-3 and 9-essential fatty acids which are useful for cortical expansion and maturation.Ghrita is considered as best sneh(unctuous) in Ayurveda,It improves the digestive fire, improves eyesight, intelligence, memory, ojas, vitalizes the body and gives luster.The most peculiar property of Ghrita is that it Imbibes the property of the drug added to it Providing a synergetic action in

combination. The most important cause of Unmada is Described as Alp satwa (weak core) of an individual. They will be mentally weak and Their Ojas will be affected which can be compensated by Ghrita. Vata dosha is the controller of the mind and Medha is the property of Pitta. So, normalcy of Vata Pitta maintained by Vata Pitta hara property of Ghrita. Lipid soluble drugs are readily available to extra and intra cellular spaces. As Blood brain barrier (BBB) has a lipophilic molecular structure. This makes the lipids and lipid soluble drugs pass easily through BBB. So, the drugs which are given in the form of ghrita which are lipids rapidly absorbed in the target areas of central nervous system. So that oral drugs and basti is given in the form of ghrita. Most of the ingredients of Kalyanak ghrit have anti-oxidant property (eg- Haritaki, Devdaru, Sariva, Krushnsariva, haridra, bhadra-ela, Amalaki which acts upon the degenerative brain cells and repair them. It also acts in normalizing the chemical changes in brain by balancing the neurotransmitters. antioxidants can remove the reactive oxygen species (ROS) and reactive nitrogen species (RNS) through scavenging radicals and Suppressing the OS pathway, which further protect against neuronal damage caused by oxidative or nitrosative stress sources in the brain, hopefully resulting in reducing symptoms of depression or anxiety.

According to DSM 5 criteria, there is significant improvement in score from 15 (moderate abnormalities) before treatment to 10 (mild abnormalities) after treatment. Parents mentioned significant improvement in eye contact, and reacting to noises and calling by parents after started giving mastra

basti. sleep improved, she cried as she entered balrog OPD and have a reactive gesture towards Treating doctor and PGs, that shows there is improvement in recognizing places and people, started pronouncing bisyllables like papa, dada, muscle tone improved. parents are satisfied that patient is cried normally and satisfied with the overall improvement. And wanted to continue further ayurvedic treatment and willing to get more sessions of panchkarma.

CONCLUSION:

The goal of current treatments is to Lessen symptoms that affect daily life and quality of Life. Parents of children with ASD are searching for an Early intervention and new alternative in managing ASD. Ayurvedic Treatments, medicines, diet modifications, are quite Promising for the same. Parents are satisfied by observing significant improvement in patients' symptoms such as improvement in eye contact, interaction, sleep cycle, cry, reduction in repetitive hand movements after giving matra basti. parents wanted to continue further ayurvedic treatment by considering results. Ayurvedic management can effectively manage Autism, by Adopting the treatment principles of Unmad. Nasya, Udvartan, Vedhan (Raktmokshan) along with shaman aushadhi mentioned in Unmad chikitsa can also be used for better results in further sessions.

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